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MN970435. San Diego Doctors Perform Groundbreaking Procedure
San Diego - A team of doctors from the Navy Vestibular
Balance Center at Naval Medical Center (NMC) San Diego
performed a groundbreaking procedure in the treatment of
Meniere's disease recently.

Meniere's disease is a serious inner ear disorder that
causes decreased hearing, dizziness, ear ringing and ear
pressure.

The team, which included physicians LCDR Michael
Hoffer, MC; Lt. Col. Richard Kopke, MC; LCDR Loring Perry,
MC; and staff specialist Dr. Derin Wester, became the first
to implant a device known as the round-window micro-catheter
into the ear of a patient with Meniere's disease.

"Until the development of the new procedure," said
Hoffer, "the treatment for Meniere's disease consisted of a
neurosurgical procedure or the injection of a large dose of
Gentamicin, a toxic antibiotic, through the eardrum."

The San Diego team of doctors also performed all of the
basic research studies establishing the safety of sustained
release devices in the ear.

"Three people out of one thousand are affected by
Meniere's disease," said Hoffer, "which thanks to the Navy,
now has a new, safer form of treatment."

The Navy Vestibular Balance Center provides patient
care, education and research, and serves as a major
Department of Defense referral center for balance and

hearing problems.

The center also has ongoing clinical and basic research aimed at treating deafness and balance disorders.

By JO1 Joe Parker, NMC San Diego

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MN970436. Guantanamo Bay Trauma Team Saves Mine Victim

Guantanamo Bay, Cuba - Desperation will drive an individual to do many things.

Desperate to flee the repression of their homeland, Cuban Miguel Vega and three companions were willing to risk barbed wire fences and land mine fields.

Three made it safely to U.S. Naval Base Guantanamo Bay.

Miguel Vega did not.

Vega was severely injured by a Cuban land mine explosion outside the Guantanamo Bay perimeter. His friends carried him through the barbed wire to freedom, where he was immediately taken to U.S. Naval Hospital Guantanamo Bay for care.

There, the trauma team consisting of Team Leader LCDR James Dunne, MC; LCDR Robert Cronin, MC; LT Don Anderson, NC; LCDR Jean Nusbaum, MC; LCDR David Tait, NC; and LCDR Rene Grosdidier, NC took over.

The team operated on Vega for more than three hours to remove shrapnel and repair wounds in his chest, abdomen and leg.

"He's recovering well," said Tait. He said Vega will probably have no permanent problems as a result of his injuries.

According to Tait, mine field accidents at Guantanamo Bay are rare, but are one of the events the team trains for.

The American mine field that surrounds the base is due to be removed by 1999, but the plan for removal of the Cuban minefield outside the fence line is unknown.

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MN970437. Survey Rates Military Medical Higher Than Civilian

Washington, DC - The Department of Defense (DOD) announced recently the initial results of a new satisfaction survey designed to document patients' experiences with health care providers in military treatment facilities (MTF). Overall, the satisfaction ratings were higher than those recorded for civilian patients visiting health maintenance organizations.

Under contract to DOD, United Healthcare and its subcontractor, National Research Corporation (NRC), are conducting these surveys which will allow the military medical system to compare its patient satisfaction within the system as well as with other health plans both nationally and locally. Civilian comparisons come from interviews NRC conducts each year with approximately 130,000 individuals in civilian health plans using these same standardized survey items.

The five main areas of the survey focus on satisfaction

with clinics, medical care, access, quality of care and interpersonal relationships. The area that received the highest edge over civilian ratings was interpersonal relationships.

On a five point scale, military MTF providers were rated a half point higher than the civilian sector (4.0, or very good, vice 3.5 for civilians). Survey questions in this area are used to rate the provider based on how well he/she relates to the patient, his/her level of courtesy, the provider's attention to what the patient says, his/her personal interest in the patient's medical problems, the provider's advice on how to avoid illness and the amount of time spent with the patient.

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MN970438. Pearl Harbor Readies for Disaster

Pearl Harbor, HI - When you're a tiny island in the middle of the Pacific, when disaster strikes, you have to know how to take care of yourself.

Which is why Naval Medical Clinic (NMC) Pearl Harbor hosted a mass casualty drill recently that brought together Navy, Army and Air Force medical personnel from throughout Oahu.

The drill, officially a Joint Mass Casualty Incident Exercise, took place at Pearl Harbor's Afloat Training Group Middle Pacific. The casualty scenario was a propane tank explosion during fire fighting training. Staff and students sustained various "wounds", including lacerations, burns and chemical contamination. Sixty mock casualties were triaged and transported to Tripler Army Medical Center, the Air Force's 15th Medical Group clinic and NMC Pearl Harbor's Makalapa Branch Medical Clinic.

With limited medical response resources on Oahu, the Army, Air Force and Navy disaster preparedness officers meet quarterly to discuss all issues of emergency preparedness. Lessons learned from these drills include standardizing medical triage tags, establishing a disaster communication net and disaster response supply trailers with a capability of holding medical supplies for 100 casualties.

All three services also participate in the annual state of Hawaii Hurricane Exercise. The participation by all military medical personnel allows Hawaiian hospital personnel to stay at their hospitals while military medical personnel triage and transport patients.
By LT James Herbst, MSC, NMC Pearl Harbor

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MN970439. Charleston Doc Receives Top AMA Award

Washington, DC - The American Medical Association presented CDR Kevin R. Kerrigan, MC, with its Dr. Nathan Davis Award for his outstanding contributions "to promote the art and science of medicine and the betterment of the public health."

Kerrigan won in the federal government employee in

career public service category. According to CAPT Robert D. Hufstader, MC, the Navy's deputy chief for the Medical Corps, Kerrigan's award is a first for the Navy.

Kerrigan received his award at a dinner held in his and other award recipients' honor in Washington, DC. It was attended by members of Congress, Secretary of Health and Human Services Donna E. Shalala and other government officials.

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MN970440. TRICARE Has Prescription for Getting Medication

Under TRICARE, getting a prescription filled can be as easy as 1-2-3.

Prescriptions can be filled by:

- One - military pharmacies at no cost;
- Two - TRICARE pharmacies for a low copayment; and
- Three - mail order prescriptions at a reduced cost.

In most areas of the U.S., TRICARE Prime, Standard and Extra beneficiaries are eligible to use any of these options. Also eligible are Department of Defense (DOD) Medicare recipients in certain BRAC sites who are not enrolled in a Medicare HMO.

Prescriptions are filled at no charge at military treatment facility (MTF) pharmacies. MTFs do not carry all medications, so it's best to call the pharmacy first to avoid a wasted trip.

Prescriptions that can't be filled at an MTF because the medication is unavailable may be filled at retail pharmacies. Beneficiaries pay a copay for this service.

Family members enrolled in Prime must use the MTF or a TRICARE network pharmacy. To get a prescription filled by the network pharmacy, simply show your TRICARE identification card and a military ID card, and pay the appropriate copayment.

If a network pharmacy is used, the copayment for TRICARE Prime for each 30-day prescription filled is \$5 for active duty family members and \$9 for retirees and their family members.

TRICARE Prime enrollees who use a non-network pharmacy must pay for their medication at the Point-of-Service rate, which means they must pay 50 percent of the cost of the medication.

For family members not enrolled in TRICARE Prime, the network pharmacy allows you to benefit from TRICARE Extra's discounted fees. Once the deductible has been met, active duty family members will pay only 15 percent of the medication's cost per 30-day supply. Retirees and retiree family members will pay 20 percent per prescription for up to a 30-day supply.

Those who participate in TRICARE Standard and use a pharmacy that is not part of the TRICARE network will pay 20 percent (active duty family members) or 25 percent (retirees and their family members) after the deductible is met.

A mail service pharmacy is a third option for TRICARE beneficiaries. It is especially beneficial for individuals

using maintenance medications for the treatment of chronic or long-term conditions, such as diabetes, arthritis or high blood pressure. Beneficiaries may order up to a 90-day supply at a reduced cost. For active duty family members the cost is \$4 per 90-day prescription. For retirees and their family members the cost is \$8 per 90-day prescription.

Beginning October 1997, all active duty service members and overseas TRICARE-eligibles with APO or FPO addresses will have access to the mail order pharmacy benefit.

For more information about TRICARE and your military health care benefit, contact your local health benefits advisor or TRICARE Service Center.

By Kimberly Allen Rawlings, Bureau of Medicine and Surgery

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MN970441. Military Women Honored by Special Stamp

Washington, DC - The Women in Military Service stamp will be officially issued Oct. 18 as part of the ceremonies surrounding the dedication of the Women in Military Service for America Memorial.

"The Postal Service is proud to honor the women, past and present, who have served our country with such dedication, courage, and patriotism in times of conflict and in times of peace for the past 220 years," said Postmaster General Marvin T. Runyon. "We hope that as these stamps appear on envelopes and cards across the country and around the world, they will serve as a reminder of the immeasurable contribution American women have made and continue to make to the cause of protecting the freedom that we enjoy."

The Postal Service will print 37 million stamps featuring five women dressed in uniforms that represent the Army, Navy, Marines, Air Force, and Coast Guard. The wording "Women in Military Service" appears in white on a blue background at the top of stamp with five white stars beneath the phrase. The names of the services are printed in black across the bottom of the stamp.

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MN970442. CNO Sends Navy Birthday Message

Washington, DC - "As we celebrate our Navy's 222nd birthday on 13 October, we should take a moment to reflect upon the tremendous accomplishments of this exceptionally busy and successful year in our Navy's history. In operations from Albania to Zaire, from the Caribbean Sea to the Arabian Gulf, and aboard ships like USS Constitution and USS Seawolf, the United States Navy continues to excel, providing forward presence and crisis response in support of our nation's vital interests.

"I spent much of my first year as CNO traveling the world and talking with Sailors. Wherever I visited, I observed the same thing - motivated, dedicated men and women who continually challenge each other to improve personally and professionally, making our Navy even better. I spoke with Sailors who are exploring exciting new

technologies and embracing tactical and operational innovation, constantly honing warfighting skills. I watched Sailors help those in need under extraordinary circumstances, in places like Guam following an airliner crash, and in Albania and Sierra Leone when evacuating non-combatants from chaos. Around the globe, every day of the year, our Navy is enhancing the security of our nation, friends and allies.

"We have much to be proud of in the United States Navy. Our future has never been brighter. We must always remember, however, that today's success is built upon the sacrifice and hard work of those who served before us, creating a legacy of over two hundred years of excellence. As our Navy celebrates another birthday, let us emulate our predecessors by strengthening the Core Values of honor, courage and commitment. Given such values, our course into the future will remain straight and true.

"Happy 222nd birthday, United States Navy. Full speed ahead!"

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MN970443. TRICARE Question and Answer

Question: I live in Virginia Beach (VA) and have been enrolled in TRICARE Prime for more than a year. I thought I just read something about TRICARE starting up in my area in May 1998. Is TRICARE here or not? Is there is still another change for military medicine coming to this area?

Answer: The Tidewater area of Virginia - the southeast corner of the state - is a demonstration or "test" area for TRICARE. Congress mandated that the Department of Defense set up the test to see how TRICARE would work for military members, their families, CHAMPUS-eligible retirees, and their families. This early version of TRICARE was called TRICARE Tidewater.

TRICARE Mid-Atlantic (also known as TRICARE Region 2), is the current version of TRICARE that is going on line around the world. It is scheduled to go on line May 1, 1998.

Those who have enrolled in TRICARE Tidewater's Prime will find few changes with TRICARE Mid-Atlantic's Prime, except a name change.

For more information about the TRICARE, contact your local Health Benefits Advisor or nearest TRICARE Service Center. Additional information is also available on the Department of Defense - Health Affairs Homepage on the World-Wide Web at <www.ha.osd>.

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MN970444. Healthwatch: Ear Infections Common In Children

Next to the common cold, an ear infection is the most common childhood illness.

Ear infection symptoms include ear pain, difficulty sleeping, fever, fussiness, decreased appetite, ear drainage, and difficulty hearing.

Ear infections occur most often in children between three months and three years of age. Younger children most often have otitis media infections, which occur in the middle ear or behind the ear drum. Older children are more prone to swimmer's ear or otitis externa, which occurs in the canal in front of the ear drum.

A tiny passage, called the eustachian tube, connects the middle ear to the back of the throat and nose. When a child has a cold, nose or throat infection or allergy, the eustachian tube can become blocked, causing a buildup of fluid in the middle ear. If this fluid becomes infected by bacteria or virus, it can cause swelling of the eardrum and ear pain.

This type of infection is called acute otitis media. Often after the acute symptoms of acute otitis media subside, fluid remains in the ear. This condition is harder to detect, and the child may have either mild hearing loss or no symptoms at all. Usually the fluid disappears on its own within three months.

Although researchers are not sure why, boys have more ear infections than girls. Other factors that contribute to babies and toddlers contracting ear infections include exposure to "second hand" tobacco smoke, bottle-feeding and contact with other children, such as in a daycare setting.

When an antibiotic is prescribed, it is important to complete all of the medication, even if symptoms abate. If the antibiotic is stopped too soon, the bacteria may not be completely gone, and the ear infection may reoccur.

While it's not uncommon for children to have several ear infections over the years of early childhood, treatment alternatives are available for those with frequent or severe infections. Consult your pediatrician for more information.
By LT Stephanie Starr, MC, U.S. Naval Hospital Guam

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October is Child Health Month. The slogan is "Solutions Before Problems" because prevention is the key to keeping our children healthy.

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Feedback and comments are welcome. Story submissions are encouraged. Contact Jan Davis, MEDNEWS editor, at e-mail <mednews@bms200.med.navy.mil>, telephone 202/762-3223 (DSN 762-3223), or fax 202/762-3224.